PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

	INSTRUCTIONS: This fo	rm should be used for tran	Smitting the (SSUE	FEE and PUBL	CATION FEE (if rem	timeD Blocks 1 shrough 5	thould be completed when	
	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as maintenance fees of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.							
	CURKENT CURRESPONDENCE ADDRESS (Note: Use Block I for my change of soldress) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompanies.						or domestic mailings of the	
		590 02/25/2005	011	PEK	papers. Each addition have its own certifical	al paper, such as an assignm to of mailing or transmission.	ent or formal drawing, must	
/2005	Barry R. Lipsitz Attorney at Law 755 Main Street, Bldg. 8 5 MGESTERE 0000002 502117 09716682		MAY 2 5 2005		I hereby certify that to States Postal Service addressed to the Ma transmitted to the USI	rtificate of Mailing or Transhis Fec(s) Transmittal is bein with sufficient postage for finitistic postage for fin	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
:1501 :1504					Caral	3 muth	(Depositors name)	
:1504	300.00 DA		E TI	RADEMA	100 /2	5 2005	(Signature)	
1	APPLICATION NO.	FILING DATE	FIR	ST NAMED INVE	NTOR	ATTORNEY DOCKET NO.		
,	09/716,682			Petr Peterko		GIC-\$35	CONFIRMATION NO. 8417	
	TITLE OF INVENTION: DYNAMIC SECURITY FOR DIGITAL TELEVISION RECEIVERS							
[APPLN. TYPE	SMALL ENTITY	issue peb	P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
_	nonprovisional	NO	\$1400		\$0	\$1400	05/25/2005	
[EXAMINER		ART UNIT	C	LASS-SUBCLASS	1		
_	BELIVEAU, SCOTT E		2614		725-025000	•	· ·	
-	Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or ogent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
		General Instrument Constraten - Watsham, PA						
	General I			/	•			
P 4	General To	assignee category or categori	(will not be printed		*	reporation or other private gru	up entity 🚨 Government	
<u>p</u>	Please check the appropriate la. The following fee(s) are e	assignee category or categori	es (will not be printed 4b. Pay	yment of Fee(s):	Individual Co	rporation or other private gru	up entity Government	
<u>p</u>	Please check the appropriate of the following fee(s) are entry fee Publication Fee (No sm	assignee category or categori nelosed: nall entity discount permitted	es (will not be printed 4b. Pay	yment of Fee(s): A check in the an	Individual Co	reporation or other private gru	up entity Government	
4	Please check the appropriate of the following fee(s) are expressions fee Publication Fee (No small Advance Order - # of the following fee(s) are expressions for the following fee(s) are expressions for the following feet feet feet feet feet feet feet fee	nssignee category or categori nelosed: nall entity discount permitted Copies	es (will not be printed 4b. Pay	yment of Fee(s): A check in the an Payment by credi	Individual Co	rporation or other private gru- closed.		
4 5.	Please check the appropriate of the following fee(s) are entered in the following fee(s) and advance Order - # of the following feet in the feet in th	nassignee category or categori nelosed: nall entity discount permitted Copies	(will not be printed 4b. Pay Dep	yment of Fee(s): A check in the ar Payment by credi The Director is 1 posit Account Nu	Individual Continued of the fee(s) is end to card. Form PTO-2038 tereby authorized by chapter 56 2 \(\) Topographic SMAL	closed, is attached arge the required fee(s), or of (enclose an extra co	py of this form).	
4 5.	Please check the appropriate of the following fee(s) are entered in the following fee(s) and advance Order - # of the following feet in the feet in th	nassignee category or categori nelosed: nall entity discount permitted Copies	(will not be printed 4b. Pay Dep	yment of Fee(s): A check in the ar Payment by credi The Director is 1 posit Account Nu	Individual Continued of the fee(s) is end to card. Form PTO-2038 tereby authorized by chapter 56 2 \(\) Topographic SMAL	closed, is attached arge the required fee(s), or of (enclose an extra co	py of this form).	
4 5.	Please check the appropriate of the following fee(s) are expenses fee Publication Fee (No sm Advance Order - # of the following in Entity Status (the following fee(s) are expenses fee (the fol	nassignee category or categori nelosed: nall entity discount permitted Copies	(will not be printed 4b. Pay Dep	yment of Fee(s): A check in the ar Payment by credi The Director is 1 posit Account Nu	Individual Continued of the fee(s) is end to card. Form PTO-2038 tereby authorized by chapter 56 2 \(\) Topographic SMAL	closed. is attached. arge the required fee(s), or compared the compared fee(s).	py of this form).	
5. Ti	Please check the appropriate. In The following fee(s) are expenses. Advance Order - # of the following feet and Pull feet following feet and Pull ferest as shown by the recommendation. Authorized Signature	nelosed: nelose	CFR 1.27. Dependence of the second of the se	yment of Fee(s): A check in the are Payment by credi The Director is 1 nosit Account Nu b. Applicant is no Fee (if any) or to m anyone other the	Individual Continuation of the fee(s) is end to card. Form PTO-2038 tereby authorized by chapter 56 2.1.7 Longer claiming SMAI re-apply any previously an the applicant, a regis	elosed. is attached. arge the required fee(s), or content of the extra c	redit any overpayment, to py of this form). R 1.27(g)(2). ion identified above. assignee or other party in	
5. TTN in an	Please check the appropriate. In The following fee(s) are e last Fee Publication Fee (No sm Advance Order - # of the Interest of the USPTO is located as shown by the record Authorized Signature Typed or printed name Typed or printed name his collection of information application. Confidentiality themitting the completed applies for and/or suggestions for 1450, Alexandria, Virginia 22313-14	assignce category or categorian relosed: and entity discount permitted copies from status indicated above) ALL ENTITY status. See 37 requested to apply the Issue plication Fee (if required) will do of the United States Patent as a course of the USE 13:11 is required by 37 CFR 1.3:11 is required by 37 CFR 1.3:11 is governed by 35 U.S.C. 13:11 is a course of the USE 13:11 is a course of	CFR 1.27. Deposition of the printed set (will not be printed by the population of the printed set of the population of the printed set of the population of the population of the printed set of the population of	yment of Fee(s): A check in the are Payment by credi The Director is I posit Account Nu b. Applicant is of Fee (if any) or to m anyone other the cc. required to obtain This collection is ading upon the is ref Information Or PLETED FORM:	Individual Continued of the fee(s) is end to card. Form PTO-2038 tereby authorized by the bery 56 2-1-7 Longer claiming SMAI re-apply any previously an the applicant, a regis Registration of the setting of the cardividual case. Any conficer, U.S. Pagent and Ticer, U.S. Page	closed. is attached. arge the required fee(s), or content of the	by the USPTO to process) gathering, preparing, and e you require to complete timent of Commerce, P.O. for Patchas, P.O. Box 1450, for Patchas,	

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

25-2005 13:50 P.03/04 Effective on 12/03/2004 Complete if Known revent to the Consoldiated Appropriations Act, 2005 (H.R. 4818) **Application Number** 09716,682 FEE TRANSMITTAL Filing Date 11/20/2000 For FY 2005 First Named Inventor Petr Peterka Applicant claims small entity status. See 37 CFR 1.27 **Examiner Name** Scott E. Beliveau Group Art Unit 2614 (\$) 1700 TOTAL AMOUNT OF PAYMENT Attorney Docket No D2169 METHOD OF PAYMENT (check all that apply) Check Credit card Money Order None Other (please identify): Deposit Account Deposit Account Number: 502117 Deposit Account Name: MOTOROLA, INC. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity Small Entity **Application Type** <u>Fee (\$)</u> Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissuc 300 150 500 250 600 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee(\$) Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims** Fee (\$) Multiple Dependent Claims - 20 or HP# Fee Paid (\$) Fee(\$) HP=highest number of total claims pad for, if greater than 20 Indep. Claims Fee Paid (\$) HP=highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE: If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid(\$) /50 =(round up to a whole number) x 4. OTHER FEE(S) Fee Paid (\$) Issue Fee \$1400 \$1400.00 Complete (if applicable) SUBMITTED BY Name (Print/Type) Robert P. Marley 215-323-1907 Registration No. 32,914 Telephone

Signature

510.05

Date



Motorola, Inc.
Intellectual Property Section
Law Department
101 Tournament Drive
Horsham, PA 19044

Telephone:

215-323-1907

Facsimile:

215-323-1300

4

Number of Pages (including this page)

Date:

May 25, 2005

To:

Examiner: Scott E. Beliveau - Group 2614

Location:

United States Patent and Trademark Office

Fax No.:

703-746-4000

From:

Attorney Name - Robert P. Marley Registration No. 32,914

Subject:

Serial No. 09/716,682 - Inventor Peterka

DOCKET NO. D2169

NOTICE: This facsimile transmission may contain information that is confidential, privileged, or exempt from disclosure under applicable law. It is intended only for the person to whom it is addressed. Unauthorized use, disclosure, copying or distribution may expose you to legal liability. If you have received this transmission in error, please immediately notify us by telephone (collect) to arrange for return of the documents received and any copies made. Thank you.

MESSAGE:

Enclosed herewith, please find PART B Issue Fee Transmittal, Fee Transmittal Form, and Change of Correspondence Address Application for filing in the below-identified application.

PLEASE GIVE THESE PAPERS TO:

EXAMINER:

SCOTT E. BELIVEAU

GROUP ART UNIT:

2614

SERIAL NO.:

09/716,682

FILED:

11/20/2000

INVENTOR:

PETR PETERKA

ATTORNY DOCKET NO.:

D2169